





Beneficiary Name: RADHESHAYAM PATHAK

BLR-UI-W0215-112-0000104-A

20041250 Employee Code: Relation: Father

Primary Insured: RAJNISH PATHAK Policy Holder: WT-GREATER NOIDA.

24 x 7 Helpline No: 18604250260 / +91 80-46267062

TERMS AND CONDITIONS

- . This card is valid only for identification purpose and subject to continuous renewal of the policy.
- · Please submit Valid photo ID for preauthorization.
- · Cashless facility is only subject to preauth approval by Vidal. If preauth is not approved OR partially approved, policy holder is required to make payment & submit the claim for a possible reimbursement.
- · Claims settlement is subject to policy terms and conditions & submission of Orginal claim documents along with valid KYC documents.
- This card is non-transferable & valid at all INSURER empanelled hospitals.
- For an updated hospital list with local contact details please visit www.vidalhealthtpa.com >> Network Providers >> Network Hospital >> United India insurance Company Limted.



24x7 Dedicated Helpline No. - 18604250260 / +91 80-46267062

General Queries: wipro@vidalhealthtpa.com

If found plese return to:

Vidal Health Insurance TPA Private Limited

Tower NO. 2, First Floor, SJR I Park, EPIP Zone, Whitefield, Bangalore - 560066. **E-mail:** help@vidalhealthtpa.com **Website:** www.vidalhealthtpa.com







Beneficiary Name: SUSHEELA PATHAK

BLR-UI-W0215-112-0000104-B Member Id:

Employee Code: 20041250 Relation: Mother

Primary Insured: RAJNISH PATHAK WT-GREATER NOIDA. **Policy Holder:**

24 x 7 Helpline No: 18604250260 / +91 80-46267062

TERMS AND CONDITIONS

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